O) ALIEC	AS FILED - F				SM	ALL EN	TITY		OTHER		
CLAIMS	. (Column 1		(Columi	n 2)		PE 🗀	<b>그</b>	OR .	SMALLE		
AL CLAIMS	1165				-	RATE	FEE		RATE	710.00	
	NUMBER F	ILED	NUMBER	REXTRA	BA	SIC FEE	355.00	_ F	ASIC FEE		
AL CHARGEABLE CLAIMS	s \$65 minu	us 20=				X\$ 9=	400	OR	X\$18=	2610	;; ;;
PENDENT CLAIMS	1/4	us 3 =	10	2		X40=	4080	OR	X80=:	8	
TIPLE DEPENDENT CLAIM	M PRESENT					+135=		OR	+270=		
he difference in column 1	is less than ze	ro, enter	"0" in co	lumn 2	- 1	OTAL	5740 a	OR-			
CLAIMS A	S AMENDED		T II	(Column 3)	\$	6 SMALL I	G FO	OR	OTHER		· · ·
(Column CLAIMS REMAININ AFTER	∤ <b>G</b>	HIGHI NUME PREVIO	BEA BUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE:	TIONAL FEE	という かんかい
Total 39	Minus	- 26	1			X\$ 9=		OR	X\$18=	,	
Independent * #	Minus		73	<b>=</b> 7,500		X40=		OR	X80=	, i	1
								1.00	A		
FIRST PRESENTATION O	F MULTIPLE DE	PENDENT	CLAIM	A Company	L	+135=	74.74 74.74 75.75	OR OR	+270=		
(Column CLAIM	11	(Colu	mn 2) ÆST	(Column 3)	L	TOTAL DDIT FEE	ADDI	OR	ADDIT FEE	ADDI	
(Column	11) S NG	(Colu High NUM PREVI	mn 2)	PRESENT EXTRA	L	TOTAL	ADDI- TIONAL FEE	OR	TOTAL		
(Column Claim Remaini After	11) S NG	(Colu High NUM PREVI	min 2) HEST IBER OUSLY FOR	PRESENT EXTRA	L	TOTAL DDIT FEE	TIONAL	OR	RATE	ADDI- TIONAL	
(Column CLAIM REMAIN AFTER AMENDM Total S	1 1) S NG NG Minus Minus	(Columnia) High NUM PREVI PAID	mn 2) HEST HEST HESE OUSLY FOR	PRESENT EXTRA	L	TOTAL DDIT FEE RATE	TIONAL	ÖR	RATE	ADDI- TIONAL	
(Column CLAIM REMAIN! AFTER AMENDM	1 1) S NG NG Minus Minus	(Columnia) High NUM PREVI PAID	mn 2) HEST HEST HESE OUSLY FOR	PRESENT EXTRA	L	TOTAL DOTT FEE  RATE  X\$ 9=	TIONAL	OR	HATE  RATE  X80=  +270=	ADDI- TIONAI FEE	
(Column CLAIM REMAIN) AFTER AMENDM Total S	1 1) S NG NG Minus Minus	(Columnia) High NUM PREVI PAID	mn 2) HEST HEST HESE OUSLY FOR	PRESENT EXTRA		TOTAL DDIT FEE  RATE  X\$ 9=  X40= +135=	TIONAL	OR OR	RATE AS18= X80= +270=	ADDI- TIONAI FEE	
(Column CLAIM REMAINI AFTER AMENDM  Total S Independent FIRST PRESENTATION C	Minus OF MULTIPLE DE	(Columnia) High NUM PREVI PAID /( EPENDEN	mn 2) HEST HEST HEST HOUSLY FOR T CLAIM	PRESENT EXTRA		TOTAL DOIT FEE  RATE  X\$ 9=  X40=  +135=	TIONAL	OR OR OR	RATE AS18= X80= +270=	ADDI- TIONAI FEE	
(Column CLAIM REMAIN)  REMAIN!  AFTER AMENDM  Total  Independent  FIRST PRESENTATION (Column SAII)	Minus  OF MULTIPLE DE	(Columnum PREVI PAID)	mn 2) HEST IBER OUSLY FOR  T CLAIM HEST MBER ROUSLY	PRESENT EXTRA		TOTAL DDIT FEE  RATE  X\$ 9=  X40= +135=	TIONAL	OR OR OR	RATE AS18= X80= +270=	ADDI- TIONAI FEE	
(Column CLAIM REMAIN)  REMAIN!  AFTER AMENDM  Total  Independent FIRST PRESENTATION (Column CAIM)	Minus  OF MULTIPLE DE	(Columnum PREVI PAID)	mn 2) JEST IBER OUSLY FOR T CLAIM Jimn 2) HEST MBER	PRESENT EXTRA		TOTAL DDIT FEE  RATE  X\$ 9=  X40=  +135=  TOTAL DOTT. FR	ADDI-	OR OR OR	RATE ADDIT FEE  RATE ADDIT FEE  RATE ADDIT FEE	ADDITIONAL FEE	
(Column CLAIM REMAIN) Total (Column CLAIM REMAIN) Transport (Column CLAIM REMAIN) Total (Column CLAIM REMAIN) Total (Independent Independent Independe	Minus  Minus  Minus  Minus  OF MULTIPLE DE  In 1)  VS  VS  VS  VS  MINUS  Minus  Minus  Minus	(Columnum PREVI PAID)	mn 2) HEST IBER OUSLY FOR T CLAIM HEST MBER AQUSLY D FOR	PRESENT EXTRA  (Column 3 PRESENT EXTRA		RATE  X\$ 9=  X40=  +135=  TOTA  LOUIT, FA	ADDI-	OR OR OR OR	RATE  X80=  +270=  TOTA  ADDIT FE	ADDI- TIONAI FEE	
(Column CLAIM REMAIN) Total Independent (Column CLAIM REMAIN) (Column CLAIM REMAIN) Total (Total )	Minus  Minus  Minus  Minus  OF MULTIPLE DE  In 1)  VS  VS  VS  VS  MINUS  Minus  Minus  Minus	(Columnum PREVI PAID)	mn 2) HEST IBER OUSLY FOR T CLAIM HEST MBER AQUSLY D FOR	PRESENT EXTRA  (Column 3 PRESENT EXTRA		RATE  X\$ 9=  X40=  +135=  TOTA DOTT. FR	ADDI- TIONAL FEE	OR OR OR	RATE  X80=  107/ ADDIT FE	ADDI- TIONAI FEE	

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PTO/SB/06 (08-03)

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PATENT APPLICATION FEE DETERMINED TO a collection of information unless it displays a valid OMB control number

_	PA	PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number			
L	CLAIMS AS FILED - PART I (Column 1) (Column 2)						_	SMALL	ENTITY	OR	OTHER THAN SMALL ENTITY	
	FOR NUMBER FILED			)	NUMBER EXTRA			RATE	FEE		RATE	FFF
	BASIC FEE (37 CFR 1.16(a))					1		\$	1	KATE	FEE	
	TOTAL CLAIMS (37 CFR 1.16(c)) minus 20 = •			-		у А		OR	ļ	\$		
	EPENDENT CLA	IMS						X \$=	-	OR	X \$=	
		ENT CLAIM PRESI	minus	<u> </u>			H	X \$=	ļ	OR	X \$=	
				(37 CFR 1.16				+ \$=	<u> </u>	OR	+ \$=	
* II	the difference in	column 1 is less t	han zero,	enter "0" in co	olumn :	2.		TOTAL		OR	TOTAL	
	C	CLAIMS AS AN	NENDE	D – PART	H							
		(Column 1)		(Columi		(Column 3)		SMALL	ENTITY	OR		R THAN ENTITY
ENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
$\square$	Total (37 CFR 1.16(c))	50	Minus	26	5	- O		X \$ =		OR	X \$ =	FEE
AËN	Independent (37 CFR 1.16(b))	1. 8	Minus	" 10	s	- 0	ı	X \$ =		1		
AM	FIRST PRESEN	TATION OF MULTIP	LE DEPEND	DENT CLAIM (	(37 CFI	R 1.16(d))	ı			OR	X S=	
36		369, 423					L	+ \$ = TOTAL ADD'L FEE		OR OR	+ \$ = TOTAL ADD'L FEE	· · · · · · · · · · · · · · · · · · ·
		(Column 1)	,	(Column		(Column 3)				J	ADDETEC	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBER PREVIOUS PAID FO	T R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
ME	Total (37 CFR 1.16(c))	•	Minus	**		2	r	x \$ =	766			FEE
Ш	Independent (37 CFR 1.16(b))	*	Minus	***		=	r	x s =		OR	X \$=	
ΑŞ	FIRST PRESENT	ATION OF MULTIPL	E DEPEND	ENT CLAIM (3	37 CFR	1.16(d))	r	-		OR	X \$=	
						(0))	-	+ \$ = TOTAL ADD'L FEE		OR [ OR	+ § = TOTAL ADD'L FEE	
		(Column 1)		(Column	2)	(Column 3)		•				
ENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUS PAID FOR	F SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
ă	Total (37 CFR 1.16(c))	•	Minus	**	$ \top $	=	1	(\$ =	,		V & -	FEE_
AMENDM	Independent (37 CFR 1.16(b))	•	Minus	***	$\top$	=	Г	(\$ =		OR	X \$=	
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						Γ			OR	x s=	
							1	OTAL DD'L FEE		OR C	+ \$_ = TOTAL ADD'L FEE	
***	If the "Highest N If the "Highest N	lumn 1 is less that lumber Previously umber Previously mber Previously P	Paid For" Paid For"	IN THIS SPA IN THIS SPA	CE is CE is l	less than 20, en	iter ' er "3	20"			_	

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

